ostomy tube sizes suitable for various ages, and many, many others. The style of writing varies with the different authors as one would expect. On the whole almost all the chapters are quite up to date. Most authors provide a lengthy and updated list of references for further reading.

A single textbook of pediatrics no longer seems to be able to deal adequately with the various subspecialty areas. The cardiovascular system, the endocrine system and many others have been covered by separate texts which are becoming fairly standard. This book does the same service for the respiratory tract. The book is thoroughly recommended for hospital libraries, clinics and those physicians who can afford to spend \$26.00 for a text covering one body system in children. They will find this book very worthwhile.

APPRAISAL OF CURRENT CONCEPTS IN ANESTHESIOLOGY—Volume 3—Edited and assembled by John Adriani, M.D., Professor of Surgery, Tulane University School of Medicine, New Orleans, La.; Clinical Professor of Surgery and Pharmacology, Louisiana State University Schoool of Medicine, New Orleans, La.; Director, Depart-ment of Anesthesiology, Charity Hospital of Louisiana, New Orleans, La. 522 pages, \$10.85.

Volume three is in the same format as that used for volumes one and two published in 1961 and 1964 respectively. The contents are composed of 50 short reviews of various current subjects prepared by 28 members from the Anesthesia Department of Charity Hospital of Louisiana. The reviews have been capably edited by Dr. John Adriani and are intended to bridge the time gap between presentation of medical information as articles in medical journals, each usually dealing with only a narrow aspect of the broad subject, and later incorporation in more coordinated monographs and textbooks. As explained in the preface, the presentations are not intended to be exhaustive reviews but are planned for the clinician who desires "to be brought up to date" on a pertinent subject without expending the time required for searching out a large number of articles. A reasonable list of references appears at the end of each subject so an excellent beginning for further investigation is available. Through this well indexed, handy sized volume of 503 pages, a reader can participate in the seminar program of a well organized anesthesiology residency.

JOHN W. PENDER, M.D.

SCIENTIFIC YEARLY OF THE LINCOLN CHIRO-PRACTIC COLLEGE—1966, Volume I—By Earl A. Rich, D.C., Editor. Owned and published by the Lincoln Chiropractice College as its official scientific journal, Indian-

Cineradiography has recently been introduced by the chiropractors as a diagnostic method. In the report by Rich on the cineroentgenological observations of the human systems, teleologic reasoning is evident based on rather inadequate observations and without any supporting evidence of anatomic or pathologic nature. This is illustrated in the comments regarding "hypermotoricity" in degenerative change involving intervertebral discs. The basic work by Fielding regarding mobility of the cervical spine has been overlooked.

The discussion on the chiropractic management of diseases of the heart incorporates printed material available to the public by the various heart associations regarding the overall management of heart disease. The chiro-

practic management of patients with heart disease is not a specific but, apparently, a general relaxing experience, not dissimilar to massage and rubdowns, designed to relieve physicial expression of disease and tension.

In the sections on lumbosacral degeneration and postural disorders, adequate references are made to supporting authorities. Postulates of the actual internal derangements or anatomic defects which exist remain undocumented. The categorization of permanent versus reversible subluxations in the lumbosacral spine is arbitrary and again lacks adequate documentation. In postural disorders, much emphasis is placed on what is considered the neurofunctional cause of scoliosis and the chiropractic methods which should be directed toward correcting this. While some basic orthopedic management is described, such as heel lifts for short legs, chiropractic measures are described "for the mechanical and neural integration of morphopathologically altered vertebral structures like in osteoarthritis of the pelvis and the vertebral column" or "in secondary neuromuscular and vertebral symptoms due to irreversible and dynamically inadaptable disorders of posture as in the occipital neuralgia of Bechterew's disease." In the same area, arteriosclerosis, particularly of the cervical arteries, is described as a disease that is rather often neglected in the judgment of chiropractic indications. Substantiating evidence of the efficacy of chiropractic therapy is missing.

The section on the functional radiography of the cervical spine reports extensive studies of small groups of patients divided into multiple categories. The method of angular mensuration used had been previously reported and relates total cervical spine motion to a baseline of the cervico-thoracic junction. This method suffers from the unreliability of impact of shoulder height on the total cervical mobility and reflects minor degrees of voluntary guarding. Evaluation of normal range of mobility is not described in completely normal individuals, although 50 patients without cervical complaint formed the baseline for comparison. Approximately a 3° greater mobility was observed in this "normal group" interpreted as indicating presence of hypertonicity of anterior neck musculature or a static imbalance of the spine in those cases suffering from neck complaints. Interpretation of the pre-manipulation and post-manipulation radiographs taken in flexion and extension is reported as indicative of the effectiveness of chiropractic management. Without a control group of similarly aged individuals with cervical symptomatology followed for a similar length of time but without manipulation, substantiation of effectiveness of the chiropractic method is not acceptable.

In the section on precoxarthrosis and coxarthrosis incipient, by Lindner, a reasonably complete listing of varying abnormalities of the hip is given with relatively complete description of radiologic findings in the standard diseases of the hip. The therapeutic approach is summarized. "Whereas the great majority of precoxarthrotic conditions are cases for the orthopedic specialist, coxarthrosis is of direct interest to the chiropractor. The therapeutic endeavors will have to include measures to relieve the pain, restoration of normal or almost normal ioint function, and proper advice to the patient as to his future behavior." Diathermy, electrotherapy, vibrations, spinal manipulations, passive, and, finally, active exercises all are listed as methods of approach in coxarthrosis.

MALCOLM D. JONES, M.D.